Name (p	KIRMAN	All PENA	īce (if applicable) , NV 895	7		District (if applicable)
Mailing A	Address (include city an	d zip code) IRFF731.COM	, , , , , , , , , , , , , , , , , , , ,		Telephone No.	
E-Mail A	ddress	THE FINCOM				
Select A	ppropriate Box(es)	CANDIDATE PAC	BAG	POL PRTY 🗌 IN	DEXP NONPRO	FIT CORP
		AMENDED ANI			INITIATE/CIRCULATE	PETITION & RECEIV
		· · · · · · · · · · · · · · · · · · ·		ON EXPEND FOND	S IN EXCESS OF 10K	
		Due January 15, 2006 2005 - December 31, 2005			C	ILE
Z		ne August 8, 2006* 006 Aug 3, 2006				_
7		- October 31, 2006*			JUL	2,3,2006 J
	Period: Aug. 4, 2	2006 — Oct. 26, 2006			DEAL	N HELLER ARY OF STATE
		- January 15, 2007*/** 2006 Dec. 31, 2006			SLOKE	
		Due January 15, 2007 1, 2006 – December 31,	2006		FOR C	FFICE USE ONLY
* TI		filed by incumbents/ca		na for office in t	he 2006 election c	vole
** T	hird Report suffice	es for 2007 Annual Fili	ng if candidate	also filed Repor	t Nos. 1 and 2	Cumulative
	CONTR	IBUTIONS SUMMARY				From Beginning Report Period #1
					This Period	through End of This Reporting Period
1.	Total Monetary Contribu (See page 1 of instru	utions Received in Excess of a	\$100		10,635.50	29,992.5
2.	Total Monetary Contribu (See page 2 of instru	utions Received of \$100 or Le	SS		-	_
	Total Monetary Contrib party. (See page 2 of i	utions in the form of loans gu	aranteed by a third			
4.	Total Monetary Contrib	utions in the form of loans tha	t were forgiven		-	
	, , , , , , , , , , , , , , , , , , , ,	,	This Period	Cumulative From Beginning of		
				Report Period #1 Through End of This Reporting Period		
5.	Total Amount of Mone Received	etary Contributions				
) (See page 2 of instruction sheet Commitments for)	1	10,635.50	29,992.50
	Contributions (When com contribution (monetary or in k	mitment is funded, report as				
((See page 2 of instruction s			-	→	
,,		See page 2 of instruction sheet)			_	
		E	EXPENSES SUI	MMARY		
	Total Monetary Expens	es Paid in Excess of \$100			15,091.05	20
9. 1	Total Monetary Expense	es Paid of \$100 or Less			10,171,00	27,050.41
	(See page 2 of instruct Total Amount of All M	tion sheet) Ionetary Expenses Paid				
(,	Add Lines 8 and 9)	(See page 2 of instruction s	heet)	1	15,091.05	29,656.91
	Total Value of In Kind E of \$100 (See page 3	of instruction sheet)			_	
	Disposition of Unspent	Contributions #3, Annual Report or 15th			_	
day	of the second month a	after candidates defeat or				
	mbent does not run fo	,	5718	6		
(2ee	page 3 of instruction :	eneer)			-	
l Dec	lare Under Penalty	y of Perjury That the Fo	AFFIRMATIO			
. 550	are officer relially	, or resputy that the FC	negoing is tru	and Correct.		
	> - 00	STAR. O				
nature		<u> </u>			Date	

EL201.doc

Revised: Sep-05

AGE / OF

RENO FIRE FIGHTERS ASSOC. Name (print) Office (if applicable)

EL201.doc

District (if applicable)

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	CHECK HERE IF LOAN	NAME AND ADDRESS OF 3 RD PARTY IF LOAN GUARANTEED BY 3 RD PARTY	NAME AND ADDRESS OF PERSON WHO FORGAVE THE LOAN, IF DIFFERENT THAN CONTRIBUTOR
RENO FIREFIGHTER 390 KIRMAN AU.					
REDO, NJ. 89502	MONTHLY	1772.58			
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RENO FIREFIGHTERS	ASSOC.
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Name (print)

Office (if applicable)

District (if applicable)

Written Commitments in Excess of \$100 or, When Added Together from One Entity Exceeds \$100 Transfer Total Amount of All Written Commitments to Line 6 of Contributions Summary

NAME AND ADDRESS OF PERSON WHO MADE THE COMMITMENT	DATE OF EACH COMMITMENT	AMOUNT OF EACH COMMITMENT
	-	

District (if applicable)

FIREFIGHTERS ASSOC. Office (if applicable)

Expense Categories

CATEGORIES	CODE
Office expenses	А
Expenses related to volunteers	В
Expenses related to travel	С
Expenses related to advertising	D
Expenses related to paid staff	. Е
Expenses related to consultants	F
Expenses related to polling	G
Expenses related to special events	Н
** Goods and services provided in kind for which money would otherwise have been paid	l
Other miscellaneous expenses	J

^{**} NRS 294A.362 requires "In Kind" contributions and expenses to be reported on a separate form, which is attached.

RENO FIREFIGHTERS ASSOC.

Office (if applicable)

District (if applicable)

Expenses in Excess of \$100 Transfer Total Amount of All Campaign Expenses to Line 8 of Expenses Summary

NAME AND ADDRESS OF			
PERSON, GROUP OR ORGANIZATION WHO RECEIVED	(See Previous Page)	DATE OF EACH	AMOUNT OF
THE PAYMENT FOR THE	1	EXPENSE	EACH EXPENSE
EXPENSE(S)	NRS 294A.365		
NO. STATE AFL-CIO			
228 S. DIVISIONST.			
CARSON CITY, UV. 84703	J	MONTHLY	279.63
NUCLC			
1150 TERMINALE WY	5	MONTHLY	1.30.46
REND, NV. 89509 VIV.AN FZEEMAN	2	MONTHLY	1,30.76
4018 BLUERRASS CT.			
RENO, NV 89509	5	7/26/06	1500.00
BREUTT JANDT			
1235 PATRICK AV.			
RENU, NV 89509	J	7/26/06	500.00
MIKE SPZINKLE			
5121 PALO ALTO CT.			,
SPARUS, NV 89436	J	7/26/00	1500.00
DAUID BUBZIEN			
1005 WESLEY DR.			
RENO, NV 89503	オ	7/20/06	1000.00
JOETTA BIDOWN 226 AUTUMN HILLS DZ.			
CAZDNEZUILLE, NY 89410	J	7)20106	1000 000
ELISA MASER	_		
1929 WATT ST.		7/26/06	1440 4
REND, NJ 89509	্য	7126106	1000.00
JOHN OCECUEZA			
7655 CHAUMONT ST.			4
LAS UBBAS, NV. 89123	5	7/26/06	100000
NEUADANS FOR NEUADA			7
GOZ E. JOHN ST. ZND FLOOR			
CAZSON CITY, NU 89706	す	7/26/06	50000
		,	,
	1		

IN KIND CONTRIBUTIONS AND EXPENSES REPORT

IN KIND CONTRIBUTION IS DEFINED AS THE VALUE OF SERVICES PROVIDED IN KIND FOR WHICH MONEY WOULD HAVE OTHERWISE BEEN PAID.

In kind contributions and expenses include: paid polling and resulting data, paid direct mail, paid solicitation by telephone, any paid paraphernalia that was printed or otherwise produced to promote a campaign and the use of paid personnel to assist in a campaign. An in kind contribution may also include, but is not limited to: goods and services such as billboards, office space, printing, food and beverage and yard signs.

The donor of in kind contributions shall furnish to the recipient (candidate or other person), a written statement setting forth the actual cost of those services or the fair market value within 30 days after the time he furnishes those services. (NAC 294A.043)

Examples of in kind contributions: (1) A person contributes billboard space and does not charge the candidate. The candidate would report the fair market value or actual cost of the billboard space as an in kind contribution; (2) A person pays for the printing cost of political signs for a candidate. The candidate would report the actual cost or fair market value of printing the signs as an in kind contribution.

Example of in kind expenses: (1) A person contributes the use of a large room to a candidate as an in kind contribution. Once the candidate utilizes the room it becomes an in kind expense to be reported.

REW FIREFIGHTERS ASSIG. Name (print) Office (if applicable)

District (if applicable)

IN KIND

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Value of All In-Kind Campaign Contributions to Line 7 of Contributions Summary

	· · · · · · · · · · · · · · · · · · ·			,		1
CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH IN KIND CONTRI- BUTION	DESCRIPTION OF EACH IN KIND CONTRIBUTION	VALUE OR COST OF EACH IN KIND CONTRIBUTION/ COMMITMENT	CHECK HERE IF LOAN	NAME AND ADDRESS OF 3 RD PARTY IF LOAN GUARANTEED BY 3 RD PARTY	NAME AND ADDRESS OF PERSON WHO FORGAVE THE LOAN
			·			
						33.11.10.11.11.11
			1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1			

REDO FIREFICHTERS ASSUE. Name (print)

Office (if applicable)

District (if applicable)

In Kind Written Commitments in Excess of \$100 or, When Added Together from One Entity Exceeds \$100 Transfer Total Amount of All Written Commitments to Line 6 of Contributions Summary

		
NAME AND ADDRESS OF PERSON WHO MADE THE IN KIND COMMITMENT	DATE OF EACH IN KIND COMMITMENT	AMOUNT OF EACH IN KIND COMMITMENT
	·	

REND FIZEFIGHTERS Name (print) ASSIC.

Office (if applicable)

District (if applicable)

IN KIND

Expenses in Excess of \$100 Transfer Total Value of All In-Kind Campaign Expenses to Line 11 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE IN KIND GOOD(S) OR SERVICE(S)	DESCRIPTION OF EACH IN KIND EXPENSE	DATE OF EACH IN KIND EXPENSE	VALUE OR COST OF EACH IN KIND EXPENSE

This page may be copied or duplicated if additional space is needed.

Prescribed by Secretary of State NRS 294A.120, 294A.125, 294A.140, 294A.150, 294A.160 294A.200, 294A.210, 294A.220, 294A.362